

FINANCIAL APPEAL PROCESS

This document outlines the Appeals Process related to University Housing applied charges for financial or medical reasons. **You have 120 days to file a Financial Appeal from the date the charge was posted to your UWM PAWS account or from the date of the University Housing invoice you are contesting.**

Your University Housing Contract is a legal contract. If you have submitted a University Housing Contract, you are obligated to the terms of the contract. If you believe you were assessed an inappropriate charge, you should immediately contact the University Housing Office to discuss the matter. If that discussion does not resolve your concerns, you may file an appeal with the Financial Appeal Committee using this form.

Contract Cancellation Fees:

If you are appealing contract cancellation penalty fees, a Contract Cancellation Request form must be submitted and processed by University Housing before a financial appeal will be reviewed.

Contract Termination Fees:

If you are appealing contract termination penalty fees, you must first submit your Contract Termination Request form and your in-person exit interview must be conducted before a financial appeal will be reviewed.

The Appeals Committee (consisting of a student, housing staff, a staff member from UWM's Financial Aid Department, and a staff member from UWM's Accessibility Resource Center) reviews appeals on a bi-weekly basis. Committee decision is emailed to the UWM email address listed on the appeal form if you are a current UWM student and is generally received within 2-3 weeks after submission. Please note that the Committee may not meet during the three weeks prior to the start of a semester and at the end of a semester, causing a delay in a decision letter.

During the financial appeal process, you must pay any balance that is due on your PAWS account, even if it involves the charge being appealed. Until an appeal is granted, the charge in question is subject to all applicable late fees and registration holds. If you pay for charges that are later reversed and no other outstanding balance is due on your PAWS account, UWM's Bursar's office will issue a refund.

Housing financial appeals must be initiated by the contract holder. Family members or other involved parties are permitted to provide relevant supporting documentation, but they may not initiate the appeal. The contract holder must include a personal statement providing rationale supporting his/her appeal, as well as any supporting documentation.

Appeals for Financial Reasons:

An appeal for financial reasons, including a claim that you are unable to meet room and board charges, must include documentation that your financial situation has changed significantly since you entered into your Housing Contract and is beyond your control. The Appeal Committee will review your Financial Aid award and status in making a determination on an appeal for financial reasons. Declined aid and failure to investigate aid options will most likely result in a denied financial appeal. Appeals based on financial reasons that do not include supporting documentation will not be reviewed. Acceptable documentation may include but is not limited to: tax statements, notification of job loss, changes to FAFSA (professional judgment changes documented with the financial aid office), or unexpected medical bills. **As outlined in your Contract Guidebook, terminations for behavior are considered unapproved and are not eligible for appeal through this financial appeal process but rather through the behavior process, within 7 days of the behavioral decision letter.**

Appeals for Medical Reasons:

An appeal for medical reasons must relate to the contract holder's personal health condition. Release from your University Housing Contract may be approved only if the medical condition you have had is an unforeseen or serious change in your health/medical condition since the start date of your Housing Contract. Appeals that do not include a completed Health Care Provider Form, including detailed responses to the questions asked on the form from your health care provider, will not be reviewed. If a vacancy exists in University Housing that adequately addresses your needs, a transfer will be arranged. The Health Care Provider Statement form included in this packet is required to be submitted for appeals for medical reasons. **Submitting a medical provider's statement does not mean your appeal will automatically be granted.**

FINANCIAL APPEAL FORM

The Health Care Provider Statement, which includes your provider's responses to the questions asked on the forms, is one of the many items the financial appeal committee will take into consideration when determining the decision of your appeal.

If you are appealing termination fees related to medical reasons, the committee strongly encourages you to complete a Housing Accommodation Request form before filing an appeal. In many cases, University Housing and/or Restaurant Operations are able to accommodate most medical needs. You can view that information here:

<http://uwm.edu/housing/wp-content/uploads/sites/175/2013/06/HousingAccommodationRequestForm2017.pdf>

If you will continue to be a UWM student and believe that you will need other accommodations as a result of your health condition, we strongly encourage you to register UWM's Accessibility Resource Center (ARC). ARC offers a wide range of support services to meet the needs of students with a variety of disabilities. You can learn how to register for ARC services and download the appropriate certification of disability form at <http://www4.uwm.edu/sac/>.

Committee Meetings

Committee meetings are at 9am on the 1st and 3rd Wednesday of each month. You can be scheduled to attend the next available meeting when you turn in your complete Financial/Medical appeal Form. You will be provided 10 minutes to discuss the details of your appeal and then 5 minutes for the committee to ask any questions. If you choose not to be present, a decision will be made from the information you provide in your appeal.

Secondary Appeals

If the appeal is denied by the Financial Appeal Committee, the contract holder has the option of initiating a secondary appeal. Secondary appeals will be considered **ONLY** if there is additional documentation or information that has not been previously reviewed. The contract holder has **14 calendar days from the date of the Financial Appeal Committee's decision letter** to file a secondary appeal in writing with the Acting Associate Director. More information regarding secondary appeals will be sent with appeal decision letters.

FINANCIAL APPEAL FORM

Resident Name (print):	Campus ID:
Resident Cell Phone #:	E-Mail Address:
Mailing Address:	City:
State:	Zip code:
Current campus address: Building:	Room Number:

Reason for appeal: <input type="checkbox"/> Financial <input type="checkbox"/> Medical- (Must submit completed Health Care Provider Statement) <input type="checkbox"/> Other _____	Semester (and year) you are appealing <input type="checkbox"/> Fall _____ <input type="checkbox"/> Spring _____ <input type="checkbox"/> Summer _____
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Charges being appealed: <input type="checkbox"/> Cancellation Fees <input type="checkbox"/> Termination Fees <input type="checkbox"/> Damage/Cleaning Fees <input type="checkbox"/> Lock Change Fees <input type="checkbox"/> Other _____	Amount being appealed:
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Please complete this section if you are appealing due to medical.

Have you requested a Housing Accommodation for your medical concern?

Yes
 No

If you have not submitted a Housing Accommodation Request with supporting documentation for your medical concern(s), please address your reasoning in your letter. The committee will take this information into consideration when determining the decision of your financial appeal.

I would like to be scheduled to be attend the appeal meeting

Yes
 No

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Please attach a typed and signed letter explaining in detail the basis for the appeal. Appeals that do not include a written letter will not be reviewed. Similarly, if your appeal is based on a health-related reason, you must also include a written statement from a health care provider, or your appeal will not be considered.

Return the Financial Appeal Form, personal letter, and any other supporting documentation such as your health care provider statement to:

UWM University Housing
Attn: Financial Appeals Committee
3400 N Maryland Avenue
Milwaukee, WI 53211

Or scan and send electronically to:

University-housing@uwm.edu

I certify that the information provided here is true and correct to the best of my knowledge.

Signature

Date

FINANCIAL APPEAL FORM

Health Care Provider Statement

University Housing Resident's Name:

Dear Medical Professional: The University Housing Resident listed above is seeking to be released ("terminate") from their University Housing Contract due to medical reasons. In order for an appeal to be granted by University Housing, it must be determined that the student has a health condition, which either was not present or has significantly worsened since entering into the University Housing Contract. Because of the new or significantly worsened health condition, the student is requesting to be released from their contractual obligation, so they can reside outside of the Residence Halls/University Apartments. This form, along with the other documentation the student submits within their appeal, is intended to assist the University Housing Appeals Committee in determining if termination fees can be reduced or waived for the resident. The information you provide will not become part of the student's educational records and will be kept in the student's confidential file in University Housing.

Please address the following questions on office letterhead:

- What is the diagnosis/impairment?
- What is the date of the diagnosis/impairment?
- Has the condition become worse since the resident started the University Housing Contract? If so, how?
- What is the current treatment?
- Has the treatment or medication changed recently?
- In lieu of terminating the University Housing Contract, is there some other accommodation that UWM could provide to meet this resident's needs? If so, please describe.
- Is it medically necessary for the student to reside outside of the University Residential setting?
- Please indicate how residing outside of University Housing will support the student in their treatment?

Your completed letter should be returned to the student listed above so they can submit all appeal documentation at the same time. If you have any questions or concerns regarding this process, please contact University Housing via phone: (414) 229-4065, fax: (414) 229-4127, or email: university-housing@uwm.edu.